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ABSTRACT

This catalog contains descriptions of the Health and Physical Education programs in the National Diffusion Network. These programs are available to school systems or other educational institutions for implementation in their classrooms. While all of the programs have been validated as effective by the U.S. Department of Education's Program Effectiveness Panel (formerly the Joint Dissemination Review Panel), the following six are currently receiving funds for dissemination from the National Diffusion Network: (1) athletic health care system; (2) Project CHOICE--cancer prevention; (3) every child a winner in physical education; (4) growing healthy; (5) know your body; and (6) social decision making and problem solving. The funded programs may be able to offer to interested schools consultant services and limited assistance with the training and materials associated with installing one of these programs in their classrooms. Unfunded Panel-approved programs offer services through cost/service agreements negotiated with potential adopters. (JD)

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Health and Physical Education Programs in the National Diffusion Network

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DECEMBER 1989

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Health

& Physical Education

Programs That Work

A Collection of Proven Exemplary Educational Programs

and Practices

in the National Diffusion Network

Compiled by
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Program Officer

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Washington, D.C. 20208–5645

December 1989

TABLE OF CONTENTS

Introduction.....v

So you Want to know More about the NDN.....1

Description of Health and Physical Education Programs

*Athletic Health Care System.....3

CASPAR (Cambridge and Somerville Program for Alcoholism Rehabilitation), Alcohol Education.....4

*Choice.....5

Curriculum for Meeting Modern Problems (The New Me-2nd Edition)..6

*Every Child a Winner With Physical Education.....7

*Growing Healthy.....8

Have a Healthy Heart.....9

*Know Your Body.....10

Me-Me Drug Prevention Education Program.....12

Ombudsman.....13

PEOPEL: Physical Education Opportunity Program for Exceptional Handicapped Learners.....14

Physical Management.....15

San Jose Nutrition Education Project.....16

Sequential Physical Education Reform: The M-5 Project K-12.....17

*Social Decision Making and Problem Solving.....18

State Facilitators.....20

Private School Facilitators.....25

Introduction

This catalog contains descriptions of the Health and Physical Education programs in the National Diffusion Network. These programs are available to school systems or other educational institutions for implementation in their classrooms. While all of the programs have been validated as effective by the Department of Education's Program Effectiveness Panel (formerly the Joint Dissemination Review Panel), those marked with an asterisk in the Table of Contents are currently receiving funds for dissemination from the National Diffusion Network. The funded programs may be able to offer to interested schools consultant services and limited assistance with the training and materials associated with installing one of these programs in their classrooms. Unfunded Panel-approved programs are able to offer services through cost/service agreements negotiated with potential adopters.

For further information on the National Diffusion Network or on these programs in Health and Physical Education, please contact you State Facilitator or Private School Facilitator (see listing, pages 20-25). or call Joseph Caliguro, National Diffusion Network Program, Office of Educational Research and Improvement, U.S. Department of Education, 555 New Jersey Avenue, NW., Washington, D.C. 20208-5645, or by telephone at (202) 357-6180.

SO . . .
You Want to Know More about the NDN

What is the National Diffusion Network?

The National Diffusion Network (NDN) is a federally funded system that makes exemplary educational programs available for adoption by schools, colleges and other institutions.

It does so by providing dissemination funds to exemplary programs, called Developer Demonstrator projects, for two purposes: (1) to make public and nonpublic schools, colleges and other institutions aware of what they offer, and (2) to provide training, materials and followup assistance to schools and others that want to adopt them.

NDN also provides funds to State Facilitators, whose job it is to serve as matchmakers between NDN programs and schools and organizations that could benefit from adopting the programs.

What makes the NDN Developer Demonstrator projects different from commercial products?

Several important things. NDN Developer Demonstrator project staff do not just hand a program to a school and expect the school to figure out how to use it. Instead, NDN program directors help local schools implement their programs to suit each school's unique needs. To do that, the director of the program provides training, lasting from one day to a week or more, to staff members in the adopting school. The director also provides followup assistance in the form of additional training, visits, telephone consultation and newsletters. Sometimes, a program director or a State Facilitator arranges for all adopters of a particular program in a region or state to form a network so they can share successful approaches and solve common problems. All NDN services are provided at little or no cost to adopters.

How does NDN assure that a program is effective and worthy of replication in other schools?

Before a program can become eligible for funding as a part of the NDN, it must be approved by the Department of Education. A program requesting a review must provide evaluation data that prove that the program is effective in the school in which it was developed or field tested, and that it could be used successfully in other schools. As of December, 1987, approximately 450 programs had been approved and 82 of them were receiving Federal dissemination funds to help other schools adopt them.

What kinds of programs are available for adoption through the NDN?

NDN programs can meet the needs of students of every age — preschool through adult — and the needs of teachers, administrators and other school personnel. Subject areas represented among the NDN programs include mathematics, science and reading. There are also programs in writing, technology, the humanities and programs for gifted and talented students.

Some programs are designed to improve preservice and inservice teacher training. Other fields represented include special education, career and vocational education, adult literacy, early childhood education, health and physical education. Some programs are directed toward processes to improve school administration and management and thereby improve instruction.

Is it possible to see a Developer Demonstrator program in Action?

Yes. Each Developer Demonstrator program receiving federal dissemination funds maintains a demonstration classroom or school where visitors are welcome. These programs are located across the United States. In addition, many of the programs have demonstration sites in states other than the one in which they were developed. NDN State Facilitators can arrange for visits to a demonstration school, or to an adoption site.

How does a school adopt an NDN program?

The first step is to contact one of the NDN State Facilitators. Their job is to help schools and other organizations learn about and adopt NDN programs. Often, for examples, they hold "awareness conferences" featuring one or more NDN programs and invite educators to attend. They also work with educators in identifying the needs in a particular school and in determining which NDN program offers a solution. When a school decides to adopt an NDN program, the facilitator arranges for the program's developer to provide training to staff in the adopting school. In addition, if a school requires financial assistance to make an adoption, the facilitator usually knows about funding sources and how to apply for a grant under various Federal, State or local programs or from private foundations or industry. Some facilitators sponsor meetings for administrators on how to apply for financial assistance.

What if the program a school wants to adopt is located in another state?

That's no problem; the NDN was developed so that educators would have access to exemplary programs, whether these programs are located in the same state or not. NDN brings the program to the school or district that wants it.

How much does it cost to adopt an NDN program?

The cost varies. NDN's aim is to provide adoption assistance at minimal cost. State Facilitators are supported by NDN grants, so there is no cost for their services, and there is little or no cost for training. An adopter usually pays for any required curriculum materials and for release time for teachers to attend training. Some schools help meet adoption costs with a grant from local or state funding sources or with funds from other sources including the private sector.

What is the responsibility of a school in making an adoption?

Each Developer Demonstrator program has basic requirements to be met by adopters. Adopting schools, for example, are usually required to implement certain basic features of the program, such as regular monitoring of students' academic progress or the use of certain activities. Some programs may require the adopting schools to compile pretest and posttest scores or other appropriate measures of effectiveness and growth in order that the adopted program's benefits can be accurately evaluated. Each adopter agrees to an adoption plan which outlines roles and responsibilities of the parties concerned.

Can NDN really help schools?

Many teachers, administrators and other educators think so. In 1986–87 alone, NDN programs were installed in approximately 20,000 schools. An estimated 50,000 teachers and other school personnel received training in the use of NDN programs and approximately 2,000,000 students were served by these adoptions. Several evaluations of the NDN show that it is meeting its goal of helping schools improve education through the dissemination of effective programs.

Where can you get more information about NDN programs?

Contact your NDN State Facilitator, Private School Facilitator, or U.S. Department of Education, Recognition Division, 555 New Jersey Avenue, NW., Washington, D.C. 20208–1525; phone (202) 357–6134.

Athletic Health Care System. A comprehensive system to prevent and manage athletic injuries in interscholastic athletic activity.

Audience Approved by JDRP for high school athletics—coaches, athletic directors, school nurses, certified athletic trainers, and student trainers.

Description Schools have the responsibility to learn to handle athletic health problems properly. State-of-the-art sports medicine methods, adapted for the high school level, meet the educational, organizational and recordkeeping requirements toward safer interscholastic athletic activities. A comprehensive risk management system serves to reduce liability. The program includes a **30-hour education session** for the entire "health care team" comprised of all coaches, the school nurse, certified athletic trainer (if on staff) and approximately 10 high school student trainers. The course provides common sense and knowledge in the areas of injury prevention, injury recognition, first aid, supportive taping, rehabilitation, organization of the training room as well as the importance and skills of record-keeping. The laboratory portion of the course provides an ample 10 hours of demonstration by skilled health professionals who oversee the actual practice of the learned skills by participants. Coaches and students, after taking the course, show greater concern and ability to recognize injuries. A **needs assessment** considers the existing athletic program for safety and health care quality. School administrators and athletic staff receive a formal written report of the noted deficiencies and suggested corrective action plans. The third step of **creating a central training room**, serviced by student trainers under adult supervision (preferably a Certified Athletic Trainer), with proper equipment and design, provides services ranging from injury prevention, first aid, and rehabilitation for all student athletes. The *Student Trainers Supervisor's Manual* provides guidelines for selecting, utilizing and evaluating student trainers. The fourth step of **standardized procedures** institutes the daily use of written guidelines, checklists and protocols. Participating schools demonstrate knowledge in emergency preparedness as well as organized management of injuries and health problems in student athletics. The *Communications Manual* explains the importance and use of **special forms**. Computer generated reports of **data analysis and observations of each sport** permit informative seasonal and year-end evaluative summaries. An *Administrative Manual* explains the *Athletic Health Care System* philosophy and all procedures. An annual National Leadership Institute for becoming a "Certified Administrator" for the *Athletic Health Care System* is conducted for one week in Seattle in July. The Continuing Education Committee of the American College of Sports Medicine has endorsed the efforts of the project developer.

Requirements Written support from school administration and local medical community; appointment of System coordinator for each school; assessment of the entire athletic program; required attendance by all coaches and student trainers at the educational session; formation of a central training room; appointment of student trainer supervisor; use of daily system procedures; accurate recordkeeping; full participation in the evaluative component of the system; a school-wide commitment to change; and attention to detail ensure successful implementation.

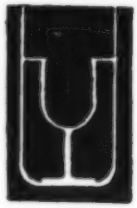
Services Awareness materials (literature and video tape) are available at no cost. Visitors are welcome by appointment at project site and additional demonstration sites. Project staff is available to attend out-of-state awareness meetings. Adoption services include: in-service training for on-site Building Program Coordinator, preferably at summer National Leadership Institute in Seattle*; Training for entire coaching staff and selected student trainers at adoption site (approx. 20-30)*; system materials, manuals, record keeping forms, guidelines and protcols; athletic program needs assessment report; evaluative services including injury data analysis, sideline safety observation reports; technical assistance and consultation as needed. Cost breakdown available upon request. *Three college credits are available for each course through the University of Washington.

Contact **Stephen G. Rice M.D.; Athletic Health Care System; Division of Sports Medicine GB-15; University of Washington; Seattle, Washington, 98195. (206) 543-1550 or 324-5116.**

Developmental Funding: USOE ESEA Title IV-C

JDRP No. 82-37 (7/21/82) Recertified (5/1/87)

CASPAR (Cambridge and Somerville Program for Alcoholism Rehabilitation) Alcohol Education Progam. A curriculum to improve attitudes and cognitive knowledge related to alcohol and alcoholism.



Audience Approved by JDRP for all students in grades 7-12. This program has also been used with elementary and alternative school audiences.

Description Sociological studies of ethnic groups with high and low rates of alcoholism confirm the apparent transmission of drinking attitudes and behavior along family and cultural lines and link the incidence of alcoholism to the way in which children are acculturated to alcohol. In contrast to views of alcoholism based exclusively on psychological or physiological determinants, these studies suggest that alcohol use and abuse are learned behaviors and that attitudes toward drinking are prime factors in the development of alcoholism.

The Decisions About Drinking curriculum has units for elementary grades K-3 and 3-6, junior high grades 7-9, and senior high grades 10-12. Each unit has sequential modules for each grade level which follow a spiral pattern, repeating similar concepts in progressively greater depth. Each module is designed for seven to ten 45-minute teaching periods, with flexibility for expansion or contraction to a minimum of five teaching periods. Alcohol use and decision-making are covered during the first six or seven periods, with alcoholism covered only during the last one to three periods, when children who are experiencing family problems will be more ready to accept this information. The curriculum emphasizes high student involvement through participatory activities such as debates, role plays, polls, drawings, and small group discussions. Activities focus on real life issues and situations, and convey repeated and consistent messages about responsible decision making in relation to alcohol use. Trained teachers using the CASPAR model can produce classroom situations in which many children will exhibit atypical behavior, signalling their distress over alcohol-related concerns. At this point, the teacher can discuss problems with the students and refer them to appropriate community agencies. Besides facilitating referrals, evaluation evidence from a number of sites indicates that proper implementation increases knowledge and affects attitudes, and that these changes remain for at least a year. Published evidence also suggests that repeated exposure may affect rates of problem drinking.

CASPAR has published a drug curriculum, *Learning About Drugs* (K-6) to be used in conjunciton with its alcohol curricula. It includes participatory activities, age-appropriate information, and a non-use message.

Requirements Teacher training consists of a 24-30 hour workshop. At a minimum, a 3-day (18 hour) workshop is recommended. It is desirable to have an additional day as follow-up; the curriculum should be tried out in a 2-3 week interval before the follow-up session. Purchase of curriculum manuals (one per school) and resource materials is required. Although films which can be purchased or rented are featured in the curriculum, they are not required. For each curriculum activity based on a film, an alternative activity is provided. The program can be implemented by one teacher or by a total school district. No personnel or facilities are required.

Services The K-3 *Learning About Alcohol* curriculum costs $75. The 3-12 *Decisions About Drinking* curriculum costs $125. The K-6 *Learning About Drugs* curriculum costs $95. Most consumables for classes can be copied from these manuals. Awareness materials are availabe at no cost. Project staff is available to attend awareness meetings, with adopter to bear costs. Workshops at project site (offered in January and July) cost approximately $300 per participant. Workshops at adopter site cost $2,000 (plus travel and expenses) for a maximum of 15 participants.

Contact **Ruth B. Davis, Ph.D., Director; CASPAR Alcohol Education Program; 226 Highland Avenue; Somerville, MA 02143. (617) 623-2080.**

Developmental Funding:

JDRP No. 82-42 (10/28/82)

Choice. A cancer prevention program for students grades K-12.

Audience Students grades K-12.

Project CHOICE
a curriculum in cancer prevention

Description Project CHOICE is a cancer prevention and risk-reduction curriculum for students in grades K-12. The program lessons are taught during a two-week time period at each grade level.

The Project CHOICE curriculum consists of comprehensive, sequential units which promote three primary learning goals: 1) Students will learn cancer information and components of cancer risk; 2) Students will learn a rational process of information evaluation and decision making; 3) Students will assume the locus of responsibility for behaviors leading to cancer risk-reduction and wellness.

The curriculum kits include original filmstrips, experiments, decision-making scenarios, group work, classroom reports, debates and discussions. The overall program emphasis is on positive health promotion, personal responsibility for health, the role of health professionals, and an understanding of risk and risk-reduction concept. The lesson themes attempt to replace a fear of cancer with a positive and active approach to maintaining health. At different grade levels the units deal with seven broad areas of cancer risk: Host Factors; Drugs—including alcohol and tobacco; Occupational Hazards; Stress; Environmental Factors—including radiation exposure; Nutrition; and Sun Exposure.

Not all cancers can or will be eliminated by cancer risk-reduction practices; therefore students are taught to understand and recognize cancer warning signs, methods of early detection, appropriate treatment, and unproven methods of cancer treatment. By developing their own personal cancer risk-reduction plans, students enhance their awareness of their own responsibility for their health. Teachers are provided with complete lesson plans, student learning objectives, a *Cancer Resource Guide* with information that corresponds to lesson content, and all teaching materials.

Requirements Adopting districts are required to take part in a one-day inservice training. The adopting district must agree to teach 8 of the 10 lessons. The gathering of evaluation data by adoptors is optional.

Costs K-12 kits include all materials and teacher resource guides at approximately $50-$395 a grade level, or approximately $1490 for a K-12 set.

Services Project staff is prepared to provide awareness, training, and follow up. Travel expenses will be negotiated with adopting districts. Sample kits are available for preview. Contact Project CHOICE Staff for details.

Contact **Sarah Miller, Project Director; Project Choice; Fred Hutchinson Cancer Research Center; 1124 Columbia Street; Seattle, Washington 98104. (206) 467-4679.**

Developmental Funding: National Cancer Inst.

JDRP No. 83-18 (3/8/83)

Curriculum For Meeting Modern Problems (The New Model Me—2nd Edition). Designed to help students understand the causes and consequences of behavior. Approved by JDRP for all students in grades 9-12. Used as a course in itself or to supplement existing courses.

SECOND EDITION

THE NEW MODEL ME

Description *The New Model Me—2nd Edition* provides students with a basic understanding of why people behave as they do. It assists students in understanding the available alternatives for solving personal problems and the short- and long-term consequences of those alternatives. Dr. Ralph H. Ojemann's causal approach to behavior is the central theme of the 374-page student text. Young people increase their personal resources, improve their self-identity, and learn to make constructive choices in critical decision situations. The student text, which is reproduced in its entirety in the teacher's manual, includes the following units: *Human Behavior, Self-Identity, Controls, Decision Making,* and *Change: The New Model Me.* The second edition has retained the strenths of the first: a student-centered approach, emphasis on esteem-building, an attractive format, and a balance between structure and freedom for the teacher. Additional features include: integration of cognitive and affective domains, emphasis on enhancing reading skills, presentation of clear objectives, emphasis on key words and phrases, use of contemporary activities that are both personalized and integrated into the curriculum, ample opportunities for students to apply newly acquired knowledge, a balanced mix of text and visuals, and a practical teacher's manual containing a rich assortment of specially prepared materials to facilitate instruction. *The New Model Me—2nd Edition* fits well in social studies, language arts, health, home economics, psychology, orientation, vocational education, family living, special education, driver training, and a variety of programs for at-risk students.

Contact John R. Rowe, Project Director; 15 Tuckaway Road; Asheville, NC 28803. (704) 684-4543

Developmental Funding: USOE ESEA Title III

Every Child A Winner With Physical Education. An individualized physical education program which improves fitness and motor skills for all children regardless of physical or mental ability.

Audience Originally approved by JDRP for students grades K-6, reapproved 1985 by JDRP for grades 1-3. Components for grades 4-6 are still available and active.

Description The program improves fitness, motor skill and contributes to improvement in academics and self-esteem. The curriculum, based on the Laban Framework, has been widely adopted. It has a practical, proven, step by step plan of installation at school sites, field tested lesson plans and training materials. Physical educators, classroom teachers, administrators and parents report positive student results in discipline and vocabulary as well as improved motor skill and fitness. The program design provides developmental movement experiences for children centered on themes of space awareness, body awareness, quality of body movement and relationships. These themes are taught through educational games, educational dance, and educational gymnastics. Competition is found in the program when child initiated. The project slogan "Every Child A Winner" finds expression through the discovery learning approach to teaching movement. Students are encouraged to reach their personal potential, and "winning" occurs as each child does his or her best.

Training is designed to help classroom teachers, special educators and physical educators implement the program. Phase I Training includes an accountability model for program implementation, teaching techniques for movement lessons, and training in program and fitness evaluation. Phase II Training (Continuation) provides more indepth training in the Laban Framework and assistance in upper grade implementation. the program should be implemented first in K-3, with a plan for expanding to K-6.

Limited funds prevented a study of program effects on grades 4-6 in 1983. Therefore, JDRP reapproval covered only grades 1-3. However, the program has been successfully implemented in grades K-6 since 1974 in over 3000 schools in 50 states, the Virgin Islands, and Canada. An evaluation (1983) involving a random sample of 3,800 students, pre- and post-testing using the Washington State Fitness Test indicated significant gains (grades 1-3) in total fitness measures using a factor score composite.

Requirements Program conducted by certified teachers. Pupil-teacher ratio 30:1. Training essential. Facilities needed are a multipurpose room or indoor area large enough for participation, as well as outdoor space to conduct lessons. A list of equipment, resource books, and training materials needed are available from the project.

Services Awareness materials are available at no cost. Visitors are welcome at demonstration sites in home state and out-of-state. Training may be conducted at project site or adopter site. Project staff is available for awareness and technical training, implementation and followup services.

Contact **Martha F. Owens; Every Child a Winner; Educational Excellence, Inc.; P.O. Box 141; Ocilla, GA 31774. (912) 468-7098.**

Developmental Funding: USOE ESEA Title III

JDRP No. 74-60 (6/6/74)
Recertified (2/85)

Growing Healthy. A comprehensive health education program designed to foster student competencies to make decisions enhancing their health and lives.

Audience Approved by JDRP for students of all abilities, grades K-7.

Description *Growing Healthy* includes a planned sequential curriculum, a variety of teaching methods, a teacher training program, and strategies for eliciting community support for school health education. It involves students, teachers, educational administrators, other school staff, community health personnel, and the families of participating students. Through group and individual activities, children learn about themselves by learning about their bodies. There is one 8-12 week unit for grades K through 6 and a semester course for grade 7. Each grade studies a separate unit specifically designed for that age group. The units include: an introduction of the five senses, feelings, caring for health, and general health habits; the senses of taste, touch, and smell and their roles in communicating health information; the emotions and communication methods with regard to sight and hearing; the skeletal and muscular systems; the digestive system; the respiratory system; the circulatory system; and the nervous system. Throughout all grades health information about safety, nutrition, environment, drugs and alcohol, hygiene, fitness, mental health, disease prevention, consumer health wellness, and lifestyle is explored and reinforced. Access to a variety of stimulating learning resources including audiovisuals, models, community health workers, and reading materials, is abundantly provided. The curriculum is designed to integrate with the lives and personality development of children by providing situations in which they may assume responsibility, research ideas, share knowledge, discuss values, make decisions, and create activities to illustrate their comprehension and internalization of concepts; attitudes and feelings. The curriculum has been developed to enhance other school subjects such as reading, writing, arithmetic, physical education, science, and the creative arts. As teachers become familiar with the subject matter during training, they simultaneously learn teaching arts and teaching methods. The teacher uses a learning center approach, which allows children to move about the room, explore resources, and work together in groups. Twenty-four separate studies were completed between 1964 and 1978 to ascertain effectiveness. A recent review and synthesis of these studies indicates that *Growing Healthy* was effective in increasing health-related knowledge and providing positive health-related attitudes.

Requirements *Growing Healthy* requires a school team comprised of two classroom teachers, the principal, and one or more curriculum support persons to: receive training in the grade level being adopted; utilize *Growing Healthy* teaching materials; involve school administrators, parents, and representatives of community health organizations in the project; and offer a *Growing Healthy* training workshop for others after the first year.

Services Awareness materials are available at no cost. A Project Facilitator has been appointed in each state to supply information and assistance. Visitors are welcome by appointment at project site and additional demonstration sites. Project staff is available to attend out-of-state awareness meetings (all expenses must be paid). Training is conducted at project site (all expenses must be paid). Implementation and follow-up services are available to adopters (costs to be negotiated). Teacher training becomes cost effective when shared by several school districts. Non-consumable instructional materials can be shared by 4-5 teachers on a grade level as well as several buildings within a school district. There are minimal instructional costs per grade level. Contact the National Center for Health Education.

Contact **Stephanie Lederman, Director; School Health Programs, National Center for Health Education; 30 East 29 Street, New York, New York 10016. (212) 689-1886.**

Developmental Funding: HEW: U.S. Pub. Health Ser.

JDRP No. 79-14 R (3/1/85)
Recertified (3/85)

Have A Healthy Heart (HHH). A heart health curriculum and aerobic fitness program for regular classroom, physical education, science, and health teachers and their students.

Audience Approved by JDRP for students in grades 4-6. Additional components are offerred and available for grades 7 through 8.

Description There is evidence to suggest that several factors associated with heart disease are related to habits acquired in childhood. The developers of this program assume that educating children about such relationships and teaching them health-promoting habits have great potential for reducing the impact of heart disease. Conducted either within the regular classroom or as part of a physical education, science or health period, this supplemental health course consists of separate fitness and lifestyle units, each with its own set of student materials. Developed in cooperation with sports medicine physicians and members of the American Heart Association's Heart, Health, and the Young Committee, the Fitness Book (third-grade readability level) contains information on setting up and maintaining a personal aerobic fitness program. Developed in cooperation with cardiologists, biomedical researchers and dieticians, the Lifestyle Booklet (fourth-grade readability level) conveys information on the effects of smoking, overweight, stress, heredity, exercise, cholesterol and hypertension on heart disease. Skillpaks containing mazes, puzzles, word scrambles, quizzes, and other activities reinforce concepts taught in the two student booklets. Student materials are used in the classroom for approximately 30 minutes two or three times a week. Students also participate in an aerobic fitness program. (No medical release was required for participating students at the project site. Local physicians determined that students healthy enough to take part in school physical educationprogram activities could participate without risk.) They perform aerobic exercise at their target rate for approximately 20 minutes three times a week. Teachers supervise and participate in all student activities. Project-developed teacher materials include a teacher's manual, a fitness program kit, four videotapes, and resource/enrichment packets.

Evidence Of Effectiveness Six school districts participated in the pilot and field test of *Have A Healthy Heart*. Gains for all groups on the project tests were significant at the p .001 level.

Requirements *Have A Healthy Heart* can be implemented in regular classrooms, science or health classes, physical education programs, or a combination of all of the above. No special materials are required. Participants should come to the workshop prepared to do aerobic dance, dissect beef hearts, and make smoking machines. Running shoes should also be worn.

Costs The cost for a one-day training workshop and required materials is $125 per participant. Materials include the following: An impiementation manual, fitness and lifestyle tests, beef heart dissection packet, smoking machine packet, relaxation packet, Fitness booklet, Lifestyle booklet, Heart Test booklet, student booklet skillpaks, sweatbands, heart decal, HHH button, and an HHH t-shirt.

Services Awareness materials are available at no cost. A color awareness videotape is available on loan. Training is usually conducted at a regional site. Follow-up services are available.

Contact **Sherry Avena; Have a Healthy Heart; 4095 173rd Place, S.E.; Bellevue, WA 98008. (206) 746-0331.**

Developmental Funding: USOE ESEA Title IV-C

JDRP No. 80-38 (12/9/80)
Recertified (1/85)

KNOW YOUR BODY
CHILD HEALTH PROMOTION CURRICULUM

A program to empower children with the knowledge, attitude, and skills necessary to implement positive health decisions concerning nutrition, drug use, smoking, exercise, dental care, accident prevention, and self-management.

Target Audience

Approved by PEP for students in grades 1-3 (Juno's Journeys component) and grades 4-6 (Know Your Body component).

Description

The Know Your Body (KYB) curriculum has two components: Juno's Journeys (grades 1-3) and Know Your Body (grades 4-6). Juno's Journeys uses a core group of characters to serve as models of positive behavior. Behavioral goals are geared to outcomes that this age group can realistically change, such as breakfast and snack choices and asking adults not to smoke in their presence. This program features student workbooks and readers, teacher manuals, song tapes, posters, parent newsletters, games, and flash cards.

Know Your Body is a multi-segment health promotion program for grades 4-6 which focuses on skills training and decision-making and the involvement of family and community. The KYB materials include student workbooks, student activity books, teachers' guides, posters, and parent newsletters. Elements of KYB include behavioral rehearsal, goal specification, diary keeping, self- monitoring, stress management, assertiveness training, peer resistance, and communication skills. KYB stresses individual responsibility for health and provides the basis for a life-long awareness of disease preventing and health promoting habits.

An integral component of both Juno's Journeys and KYB is an annual biomedical screening which measures height/weight, blood pressure, cholesterol, and exercise fitness level.

Both programs are taught one or two times a week for an average of 30-40 minutes per lesson.

Evidence of Effectiveness

The results of two longitudinal evaluations demonstrated that the KYB/Juno's Journeys curricula have significant positive effects on students' health- related knowledge, behavior, and biomedical risk factors. Students receiving KYB showed significant favorable changes in health knowledge, serum cholesterol, physical endurance, smoking, and diet.

Implementation Requirements

Classroom teachers participate in a one- to two-day inservice training. Typically, a KYB coordinator is established within a school system. The cooperation of teachers, administrators, school food service personnel, and parents is key to the success of the program, as well as the involvement of local health volunteers, hospitals, and physicians.

Costs

Estimated cost for one year for 500 students in grades 1-6 is $11,000.

Services

A general information packet which includes a sample text is available for $3. Program materials include workbooks, readers, teacher's guides. The Know Your Body staff assists the local coordinator in the first year conducting teacher training, health screening, and program evaluation.

Contact

Ken Resnicow, Donna Cross, and Lisa Cohn, The American Health Foundation, 320 East 43rd Street, New York, NY 10017 (212) 953-1900

Developmental funding: National Heart Lung and Blood Institute and National Cancer Society, W.K. Kellogg Foundation.

PEP Approval Number: 89-1 (3/24/89)

Me-Me Drug & Alcohol Prevention Education Program. A multi-disciplinary prevention program for classroom teachers that help improve students' self-concept and teaches them to say NO to drugs.

Audience Approved by JDRP for all students in grades 1-6 and has been adapted for use with kindergarten level students.

Description ***Believe In Me*** is the heart of the *Me-Me Program* which was developed to improve those conditions which are found to be present in most young people who have abused drugs and alcohol. Research has shown that most young people who abuse drugs have poor self-concepts and lack the skills necessary to make good decisions, the *Me-Me Program* is based on the premise that if these conditions can be improved early in a child's life, the child will be less likely to turn to drugs later on. Drug information is presented to children according to their grade and knowledge level about drugs. In addition, children learn about MR. YUK; who is qualified to give them medicines; the differences between prescription and over-the-counter medicines; and the effects of alcohol, caffeine, and nicotine.

The program is designed to be used an hour a week by classroom teachers and is easily incorporated into most areas of the curriculum. The program works best if all classroom teachers from a school implement the program. Exceptions to this must be approved by the Project Director.

Pre-/post-tests were administered to experimental and control groups with matching socio-economic and geographic backgrounds and ability levels. The program has shown to increase students' self-concepts, their ability to make good decisions, and their factual information about drugs which are relative to their grade levels. In addition, several school districts are reporting among high school students who had participated in the *Me-Me Program* during their elementary level years.

A recent addition to the program is a parent cmponent which encourages involvement in activities, regular meetings, and continuous feedback.

Each participating teacher needs a set of manuals which include either the Primary Level Manual & Drug Information Manual or the Intermediate Level Manual & Drug Information Manual which cost $39. a set. The *Kindergarten Manual* costs $12. Included in the Drug Information Manual are 16 pages of general information about drugs for teachers' own information. The curriculum contains approximately 75 different activities for each grade level. Revisions are made in the curriculum regularly based on teacher feedback. **New editions of the manuals were published in August 1987.**

Requirements All teachers participating in the program must attend a six-hour training session. It is highly recommended that principals from the adopter schools also attend the training session. The program is best suited for adoption in school districts who are looking for a structured program that assures regular use by teachers.

Services General information about the program is available at no cost. A fifteen-minute filmstrip/tape is available on loan. *Sample Packets* are available at $10 per packet. Visitors are welcome by appointment at demonstration sites. Project staff is available to conduct awareness sessions (costs to be negotiated). Training is conducted only at adopter site (all expenses must be paid, including travel, lodging, meals, and material costs). Schools can apply for Drug-Free School monies to cover program expenses. Monitoring of program implementation is done throughout the first year by project staff.

Contact **Artie Kearney, Ph.D., Executive Director; ME-ME Inc.; 426 W. College Ave.; Appleton, WI 54911. (414) 735-0114**

Developmental Funding: USOE ESEA Title III

JDRP No. 75-47 (5/15/75)

Ombudsman. A school-based semester-long drug education/primary prevention program.

Audience Approved by JDRP for students of all abilities, grades 5-6. This program has been used in other settings with grades 7-8.

Description *Ombudsman* is a structured course designed to reduce certain psychological and attitudinal states closely related to drug use. *Ombudsman* does not emphasize information about drugs per se, although some drug topics are included for discussion as part of specific exercises. The course has three major phases. The first phase focuses on self-awareness and includes a series of exercises permitting students to gain a wider understanding and appreciation of their values as autonomous individuals. The second phase teaches group skills and provides students with an opportunity to develop communication, decision-making, and problem-solving techniques that can be applied in the immediate class situation as well as in other important group contexts such as with family and peers. The third phase is in many ways the most important: the class uses the insights and skills gained during the first two phases to plan and carry out a project within the community or school. During this phase, students have an opportunity to experience the excitement and satisfaction of reaching out to others in a creative and constructive way. The program must be presented to a given classroom of students for a minimum of two hours per week for a full semester.

Requirements The program can be conducted by classroom teachers or other professional or school personnel. A three-day training session for at least eight professionals is required prior to implementation. Two professionals must teach at least one *Ombudsman* program per semester. Training takes place at the adoption site or the project site. Eight to 30 participants from one or more school districts can be trained simultaneously.

Costs One *Ombudsman* teacher's manual must be purchased for each trainee. A supplemental package of related books and filmstrips can be purchased for each school implementing *Ombudsman*. The cost of this material is approximately $300 per school. Equipment required includes a filmstrip projector, a movie projector, and other normal materials. Daily consultant fee, negotiable. Evaluation service is also available from The Drug Education Center. The Student Attitudial Inventory is used to evaluate the *Ombudsman* program.

Services Awareness materials are available at no cost. Visitors are welcome at project site any time by appointment. Project staff is available to attend out-of-state awareness meetings (travel and per diem must be paid). Training is conducted at project site (all expenses must be paid including cost of training materials). Training is also conducted at adopter site (all expenses must be paid including cost of training materials). Follow-up services are available to adopters (all expenses must be paid).

Contact **Jay Keny, Dissemination Coordinator; The Drug Education Center; 500 E. Morehead; Charlotte, NC 28202. (704) 375-3784.**

Developmental Funding: HEW: National Institute on Drug Abuse

JDRP No. 78-194 (6/12/79)
Recertified (1/85)

PEOPEL: Physical Education Opportunity Program for Exceptional-Handicapped Learners. A success-oriented P.E. program featuring supervised peer-tutors (student aides) and individualized learning and instruction.

Audience Approved by JDRP for handicapped students and nonhandicapped peer tutors, grades 9-12. This program has also been adapted for use in middle and elementary schools.

Description Project PEOPEL was developed to help schools meet the needs of both handicapped (exceptional) and nonhandicapped students through peer tutoring in a success-oriented physical education experience. PEOPEL is designed for students who because of some physical, mental, social, or emotional condition will benefit more from an individualized program than from general physical education. Through individualized learning in physical education, students develop mental, social, emotional, and physical abilities at their own pace. The emphasis on the individualized learning of a variety of physical activities is made possible by utilizing peer-tutors, called PEOPEL Student Aides, who have completed a special trianing/orientation class and are under the direct supervision of the physical education teacher. This provides a one-to-one instruction ratio in a coeducational setting with up to 30 students per class (15 exceptional learners and 15 student aides). Each student experiences fun and daily success in a variety of individual, dual, or team activities. The organization of PEOPEL Teacher's Guide has 35 separate Units of Instruction, which were developed with task-analyzed performance objectives. Unit of Instruction Performance Objectives are included for history, basic rules, etiquette, terminology, safety, and skill progressions. Other PEOPEL materials are the *Administrative Guide* and *Student Aide* (peer-tutor) *Orientation Guide*.

Contact Dan Arrendondo, Director; Project PEOPEL; Phoenix Union High School System; 2526 W. Osborn Rd.; Phoenix, AZ 85017. (602) 251-3867. Larry Irmer, Coordinator; 3839 West Camelback Rd.; Phoenix, AZ 85019. (602) 841-3124.

Developmental Funding: USOE ESEA Titles III and IV-C.

JDRP No. 79-10 (3/29/79)

Physical Management (PM). Physical education designed to meet the needs of overweight students.

Audience Approved by the JDRP for overweight students, grades 10-12. The program has been used in other settings with grades 7, 8, and 9.

Description The *Physical Management Program* was developed to give overweight students grades 10-12, the knowledge and opportunity to interrupt the cycle of obesity and inactivity that prevents a fully healthy and effective lifestyle. More specifically, PM seeks to:

1. Set the stage for positive change by providing structured practice in social skills, assertiveness, and goal setting.
2. Provide practical nutrition education to students by teaching food group selections, portion control, and caloric density of foods.
3. Enable students to evaluate their physical condition and body composition, and to design a conditioning program for themselves based on the principles of exercise prescription.
4. Replace inappropriate eating and exercise habits which have led to obesity and poor physical condition.

Enrollees may earn either a required or elective physical education credit for their participation.

Participants (grades 10-12 in the *Physical Management Program*) have demonstrated significantly greater reductions ($p < .05$) in body weight and percentage of body fat, and significantly greater increases in levels of physical fitness ($p < .05$) than comparable nontreatment students (enrolled in standard Physical Education) when assessed by selected fitness and body composition measures.

Requirements *Physical Management* can be implemented in schools of any size with minimal cost and adaptation. Testing may be as extensive as the materials that are available within the school. The minimum requirements are a balance beam scale, a set of skinfold calipers, a stopwatch, and a personality assessment instrument. Instructional materials, test protocols, curriculum guides, resource bibliography, and recordkeeping guidelines are included in the program training manual (provided in training workshops). No new staff or special facilities are required.

Services A complimentary awareness packet and a 15-minute video presentation of an existing program with administrator, parent, and student interviews ($15 rental fee) are available. Project staff is available to attend awareness meetings (cost negotiable). Two-day training workshops are provided at the adopter site by project staff (costs to be paid by adopter). Follow-up services are also available to adopter sites (costs to be paid by adopter). Visitors are welcome at demonstration sites by appointment.

Contact **Eileen Solberg, Project Director, Physical Management Project, P.O. Box 891, Billings, MT 59103; (406) 252-4822.**

Developmental Funding: ESEA Title IV-C

JDRP No. 84-3 (3/13/84)

San Jose Nutrition Education Project (SJNEP)—Nutrition Through Science. A teacher training program designed to train young children in the science of nutrition while reinforcing regular classroom subjects, especially science.

Audience Approved by JDRP for all students grades K-4.

Description The major goal of the program is to develop cognitive knowledge, foster positive food habits, and improve the overall nutritional status of children in kindergarten through fourth grade. A team approach involves teachers, food service staff members, parents, and students in promoting nutrition awareness through an articulated curriculum of lessons, activities, displays, games, and incentive awards. Workshops for teachers and food service staff focus on innovative teaching techniques to promote increased nutrition knowledge and better food consumption habits by students. Techniques include strategies for integrating nutrition education instruction in primary classrooms with regular classroom subjects and the school food service program. Curriculum guides are simple to use and include over 150 lessons each, plus information and teaching aids to encourage teacher participation. The curriculum is sequential and correlated with appropriate grade levels to allow teachers to individualize student instruction. Games have been designed as self-instructional tools or for small group instruction. Student worksheets are available in Spanish and English.

After training, teachers provide two nutrition education activities per week. Food service staff members implement a monthly cafeteria display which reinforces concepts taught in the classroom. Food service personnel also administer incentive awards to students who display positive behavior in the school lunchroom. Parents volunteer during classroom activities and receive monthly newletters that provide nutrition information, games and nutritious recipes.

From 1977-85, over 10,000 students grades K-4, were evaluated in their use of SJNEP using state-developed criterion-referenced tests and platewaste (consumption) studies. Project students achieved a 12-16% increase in cognitive knowledge. Plate waste studies demonstrated that project students increased consumption of all food on the school lunch, especially vegetables, salad, fruit, whole grain bread and milk.

Requirements A site coordinator implements and directs the adoption program at one or more sites. The coordinator may be an interested administrator, teacher, or health or nutrition professional. Teachers complete six hours of inservice training in nutrition principles, instructional materials, and program methodology. After inservice, teachers select, implement, and record two to three nutrition lessons per week and one food-related activity per month. Teachers assist in evaluation of program. Food service staff participate in at least one hour of inservice; the six hour workshop is highly recommended.

Services Awareness materials are available at no cost. A videotape presentation is available. Arrangements can be made, if given advance notice, for visitors to observe the program in use in various settings. Project personnel is available to attend out-of-state awareness meetings. Training is conducted at the project site or at the adopter site. Implementation, follow-up, and evaluation services are available to adopters. Costs for all services available to be negotiated. Recommended minimum materials costs for each component of SJNEP are: Each teacher requires a curriculum guide at $35.00 and training materials at $8.00. Each adopting site requires a Bibliography and Recipe Reference guide at $10.00 and an Incentive Award manual at $9.00. Project developed instructional aides help enhance program activities and are recommended at approximately $100. Master copies of monthly parent newsletter are included with adoption of the program. The adopting district or school is to assume duplicating costs of the newsletter and pre/post testing materials.

Contact **Laura Fogleman, Project Director; San Jose Unified School District Food Division; 250 Stockton Ave.; San Jose, CA 95126. (408) 998-6032/6021.**

Developmental Funding: California State/USDA NET

JDRP No. 82-3 (2/17/82)
Recertified (9/85)

Sequential Physical Education Reform: The M-5 Project. A logical, sequential, self-directed program in physical education that fosters knowledge about P.E. and positive attitudes toward becoming and staying physically fit.

Audience Approved by JDRP for students of all abilities, grades K-6.

Description The project's mission is to give students and their teachers knowledge about physical education and positive attitudes toward becoming and staying physically fit. Activities are built around major skill areas through the use of a variety of techniques that include specially designed learning centers and individualized learning activities.

The program endeavors to enable each child to develop physically, emotionally, socially, and mentally through the medium of physical activity. At the beginning of each school year students are requested to complete a health appraisal form which aids teachers in recommending individual programs. As soon as the forms are returned, physical fitness testing begins, with each child being tested on the following skills: bench push-ups, curl-ups, squat-jumps, standing broad-jump, and the 30-yard dash. After testing, skill level needs are determined and the M-5 program begins.

All students visit six movement activity centers two days a week for approximately five minutes. The centers are designed to develop fitness and movement skills through sequential activities from lower to higher levels. As skills are developed, students progress to the next higher skill level, which allows students to gain the foundations needed in a logical and sequential manner. One day a week is spent in self-testing to determine improvement, the remaining two days in movement motivators: bean-bag activities, group and creative games, gymnastics, hoop activities, parachute activities, and yarn-ball activities. In addition, students are encouraged to be self-directive and to develop interest and proficiency in worthwhile recreational activities. It is expected that through this effort students will develop physically, emotionally, socially, and mentally as they engage daily in physical education.

Contact **Carolyn M. Morphy, Director; McBee Institute of Creative Education, Inc.; P.O. Box 1315; Marion, NC 28752-1315. (704) 756-4871.**

Developmental Funding: USOE ESEA Title IV-C

JDRP No. 78-172 (5/13/78)

SOCIAL DECISION MAKING AND PROBLEM SOLVING

A program that helps teachers facilitate the development and use of social decision making and problem solving skills in children and prevent substance abuse and related behavior difficulties.

Target Audience

Approved by PEP for teachers, administrators, guidance and child study team staff, and parents of children in the elementary grades, both in regular and special education programs.

Description

Social Decision Making and Problem Solving works by providing training to educators and parents who then pass on skills to children in self control and group participation, the use of an eight step social decision making strategy, and practical know-how regarding the use of these skills in real life and academic problem areas.

The program is curriculum-based and occurs in three phases: readiness (which targets self-control and group participation and social awareness skills), instructional (which teaches an eight-step social decision making strategy to students), and application (in which children are taught to use skills in real life interpersonal and academic situations).

The primary objective is to teach children a set of heuristic social decision making and problem solving thinking steps. Lessons are given to groups of children and are conducted on a regular basis by the classroom teacher. Extensive guided practice is built into most lessons and videotapes are used to provide skill modeling and hypothetical situations. Facilitative questioning and dialoguing stimulates integration of the techniques, and cooperative group projects and writing assignments further advance that process.

Evidence of Effectiveness

In pilot tests and evaluations of the program over a ten year period, teachers, following training, were found to improve their ability to facilitate children's social decision making and problem solving. Children receiving the program improved their social decision making and problem solving skills relative to control groups. Students also showed more prosocial behavior in school and greater ability to cope with stress upon transition to middle school, when compared to controls. Students followed up in high school showed high levels of positive, prosocial behavior and decreased anti-social, self-destructive and social disordered behavior compared to controls.

Implementation Requirements

An individual practitioner--teacher, health educator, guidance counselor, school psychologist, social worker--can be prepared to implement the program. At the building or district level, training is provided to site leadership teams consisting of representatives from district and building administration, guidance, special education, substance abuse counselors, teachers, and parents, as appropriate.

Costs

Costs in the installation year include training, curriculum materials, and on- site and telephone consultation. Exclusive of travel expenses, base cost is approximately $2,100 per district. Subsequent year costs can be estimated at $21 per student with a $550 minimum.

Services

Staff provide a two to three day training program for teachers, administrators, guidance and child study team staff and parent leaders. The program also works with local staff to implement programs in subsequent years. Workshops at our site for interested individuals cost approximately $225 for two days of training in school-based applications and $75 for a third day focusing on working with parents, including materials and follow-up contacts.

Contact

Maurice J. Elias, Department of Psychology, Rutgers University, New Brunswick, NJ 08903. (201) 932-2444

Developmental funding: National Institute of Mental Health, the William T. Grant Foundation, the Schumann Fund for New Jersey.

PEP Approval Number: 89-16 (7/18/89)

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